



State of Rhode Island
Department of State - Business Services Division

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Designation of Registered Agent/Office

DOMESTIC or FOREIGN Partnership

→ No Filing Fee

Pursuant to the provisions of RIGL 7-13.1-118 or 7-12.1-909 the undersigned partnership submits the following statement for the purpose of designating a registered agent and office in the State of Rhode Island:

1. Entity ID Number 49050-		2. Exact Name of the Partnership BALTIMORE ASSOCIATES	
3. The address of the registered office is:			
Street Address (NOT a P.O. Box) 200 EXCHANGE ST. # 417			
City/Town PROVIDENCE		State RHODE ISLAND	Zip 02903
4. The name of the registered agent is: GARY T. MALLOY			
5. Under penalty of perjury, I declare and affirm that I have examined this Statement of Designation of Registered Office by the Partnership, and that all statements contained herein are true and correct.			
Name of a General Partner or Authorized Representative KEVIN T. MALLOY			Date 3/26/24
Signature of the a General Partner or Authorized Representative 			

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED 257
MAR 26 2024
BY 13302